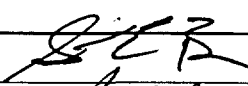
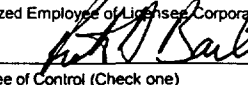


UNITED STATES OF AMERICA  
FEDERAL COMMUNICATIONS COMMISSION

FOR  
FCC  
USE  
ONLY

**PART I - APPLICATION FOR CONSENT TO TRANSFER CONTROL OF CORPORATION HOLDING STATION LICENSE**  
(This application must be filed before Transfer of Control takes place)

1. (a) Name of corporate licensee <b>MediaOne of Metropolitan Detroit, Inc.</b>			
(b) Number and street address <b>Attn: Christine Page 188 Inverness Drive West, 6th Floor</b>			
(c) City <b>Englewood</b>	(d) State <b>CO</b>	(e) ZIP Code <b>80112</b>	
2. Internet address:		3. Taxpayer Identification Number <b>38-2011628</b>	
4. Call sign and radio service of each station <b>KNHY641 (GB)</b>			
5. (a) Fee Type Code <b>PATM</b>	(b) Fee Multiple <b>0001</b>	(c) Fee Due \$ <b>45.00</b>	FOR FCC USE ONLY
6. Name(s) and Address(es) of Transferee <b>AT&amp;T Corp. 32 Avenue of the Americas 1120 20th St., NW New York, NY 10013 Washington, DC 20036</b>			
7. Subsequent to the Transfer of Control, will the licensee corporation be the same corporate entity? That is, will it retain its present name, corporate charter, State of incorporation, etc.? If "NO", give details on Page 3.			YES NO <b>X</b>
8. Subsequent to the Transfer of Control, will the licensee corporation be a representative of any foreign government? If "YES", give details on Page 3.			<b>X</b>
<b>9. THIS SECTION TO BE ANSWERED ONLY BY LICENSEES OF PUBLIC COAST, AIRPORT CONTROL TOWER, AERONAUTICAL ENROUTE, AERONAUTICAL FIXED, OR COMMON CARRIER ALASKA PUBLIC FIXED STATIONS. SUBSEQUENT TO THE TRANSFER OF CONTROL:</b>			
(a) Will any officer or director of such corporation be an alien? If "YES", see Instruction 6.			YES NO
(b) Will more than 1/5 of the capital stock be either owned of record or may it be voted by aliens or their representatives, or by a foreign government or representative thereof, or by any corporation organized under the laws of a foreign country? If "YES", see Instruction 6.			
(c) Will the licensee be directly or indirectly controlled by any other corporation? If "YES", answer Items (d) through (h) below.			
(d) What is the name and address of the corporation in immediate control?			
(e) Under the laws of what State or Country is the controlling corporation organized?			
(f) Is more than 1/4 of the capital stock of controlling corporation either owned of record or may it be voted by aliens or their representatives, or by a foreign government or representative thereof, or by any corporation organized under the laws of a foreign country? If "YES", give details on Page 3.			YES NO
(g) Is any officer or more than 1/4 of the directors of the controlling corporation an alien? If "YES", on Page 3 state name, nationality, and position of each, and state the total number of directors, and give a brief biographical statement for each alien.			
(h) Is the controlling corporation in turn controlled by other companies? If "YES", on Page 3, or a separate sheet of paper, provide information for each of these controlling companies covering information requested in Items (d) through (h).			
<b>CERTIFICATION</b> ● Applicant waives any claim to the use of any particular frequency regardless of prior use by license or otherwise; ● Applicant will have unlimited access to the radio equipment and will control access to exclude unauthorized persons; ● Neither applicant nor any member thereof is a foreign government or representative thereof; ● Applicant certifies that all statements made in this application and attachments are true, complete and made in good faith; ● Neither the applicant nor any other party to the application is subject to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance.			
<b>WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(A)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).</b>			
SIGNATURE <b>X</b>  Authorized Employee of Licensee Corporation		DATE <b>X 6/28/99</b>	
SIGNATURE  Transferee of Control (Check one)		DATE <b>7/1/99</b>	
<input type="checkbox"/> Individual <input type="checkbox"/> Partner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (Specify):			

**DETAILS / ADDITIONAL INFORMATION:**

UNITED STATES OF AMERICA  
FEDERAL COMMUNICATIONS COMMISSION

**PART II - AUTHORIZATION TO HOLD STATION LICENSE(S) AFTER TRANSFER OF CONTROL OF CORPORATION**

1. Name and mailing address of corporate licensee

MediaOne of Metropolitan Detroit, Inc.  
Attn: Christine Page  
188 Inverness Drive West, 6th Floor  
Englewood, CO 80112

2. Call sign and radio service of each station

KNHY641 (GB)

**DO NOT WRITE IN THIS BLOCK**

**CONDITIONS OF GRANT**

The corporate licensee is hereby authorized to continue holding the radio station license(s) listed in item 2 on the basis of the representations made in the application for this authorization.

This authorization is granted for the term of the outstanding license(s) for the station(s) listed in item 2.

**DATE AUTHORIZED:**

**FEDERAL  
COMMUNICATIONS  
COMMISSION**

**THIS AUTHORIZATION TO BE FILED WITH  
CORPORATION'S RADIO STATION RECORDS**

COLE, RAYWID & BRAVERMAN, L.L.P.

JOHN P. COLE, JR.  
BURT A. BRAVERMAN  
ROBERT L. JAMES  
JOHN D. SEIVER  
WESLEY R. HEPPLER  
PAUL GLIST  
DAVID M. SILVERMAN  
JAMES F. IRELAND, III  
STEVEN J. HORVITZ  
CHRISTOPHER W. SAVAGE  
ANN FLOWERS  
ROBERT G. SCOTT, JR.  
SUSAN WHELAN WESTFALL  
THERESA A. ZETERBERG  
KARLYN D. STANLEY  
JOHN DAVIDSON THOMAS  
JOHN C. DODGE  
FREDERICK W. GIROUX  
GEOFFREY C. COOK  
MARIA T. BROWNE  
DONNA C. RATTLEY  
THOMAS SCOTT THOMPSON  
ADAM S. CALDWELL  
SANDRA GREINER GIBBS  
JAMES W. TOMLINSON  
MARK S. KRISTIANSEN  
CHRISTIN S. MCMELEY\*  
HEATHER M. WILSON  
DAVID N. TOBENKIN\*

\*ADMITTED IN OKLAHOMA ONLY  
\*ADMITTED IN CALIFORNIA ONLY

ATTORNEYS AT LAW  
SECOND FLOOR  
1919 PENNSYLVANIA AVENUE, N.W.  
WASHINGTON, D.C. 20006-3458  
(202) 659-9750

July 7, 1999

ALAN RAYWID  
(1930-1991)

OF COUNSEL

RECEIVED  
JUL 12 1999

FACSIMILE  
JUL 12 1999

INTERNET  
FEDERAL COMMUNICATIONS COMMISSION  
OFFICE OF THE SECRETARY

FCC/MELLON

JUL 07 1999

**BY HAND DELIVERY**

Federal Communications Commission  
Transfer of Control  
P. O. Box 358130  
Pittsburgh, PA 15251-5130

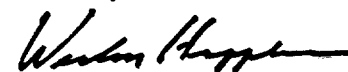
**Re: Transfer to AT&T Corp. of MediaOne's Interest in FCC Licenses  
Business Radio Service**

Ladies and Gentlemen:

Enclosed please find FCC Form 703 requesting authority for the transfer from MediaOne to AT&T Corp. of MediaOne's interest in MediaOne of New England, Inc., the licensee of the referenced facilities on the attached list. We are also enclosing FCC Form 159 and a check in the amount of \$270.00 to cover the required filing fee.

Should you have any questions regarding this matter, please contact the undersigned.

Sincerely,



Wesley R. Heppler

Enclosure

EXHIBIT

ENTITY NAME	CALL SIGN	LOCATION	STATE
MediaOne of New England, Inc.	KNDH452	Deerfield	NH
MediaOne of New England, Inc.	KRL533	Concord	NH
MediaOne of New England, Inc.	KST587	Portsmouth	NH
MediaOne of New England, Inc.	KNEJ216	Dover	NH
MediaOne of New England, Inc.	WNLJ857	Sanford	ME
MediaOne of New England, Inc.	KVZ416	Saco	ME

READ INSTRUCTIONS CAREFULLY  
BEFORE PROCEEDING

FEDERAL COMMUNICATIONS COMMISSION  
**REMITTANCE ADVICE**

APPROVED BY OMB 3060-0589

SPECIAL USE

FCC USE ONLY

(1) LOCKBOX #

PAGE NO. 1 OF 2

**SECTION A - PAYER INFORMATION**

(2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card)

Cole, Raywid & Braverman, L.L.P.

(3) TOTAL AMOUNT PAID (dollars and cents)

\$ 270.00

(4) STREET ADDRESS LINE NO. 1

1919 Pennsylvania Avenue, N.W.

(5) STREET ADDRESS LINE NO. 2

Suite 200

(6) CITY

Washington

(7) STATE

DC

(8) ZIP CODE

20006

(9) DAYTIME TELEPHONE NUMBER (Include area code)

202-659-9750

(10) COUNTRY CODE (if not in U.S.A.)

**IF PAYER NAME AND THE APPLICANT NAME ARE DIFFERENT, COMPLETE SECTION B  
IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C)**

**SECTION B - APPLICANT INFORMATION**

(11) APPLICANT NAME (if paying by credit card, enter name exactly as it appears on your card)

AT&T Corp.

(12) STREET ADDRESS LINE NO. 1

32 Avenue of the Americas

(13) STREET ADDRESS LINE NO. 2

(14) CITY

New York

(15) STATE

NY

(16) ZIP CODE

10013

(17) DAYTIME TELEPHONE NUMBER (Include area code)

(18) COUNTRY CODE (if not in U.S.A.)

**COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEETS (FORM 159-C)**

**SECTION C - PAYMENT INFORMATION**

(19A) FCC CALL SIGN/OTHER ID

KNDH452

(20A) PAYMENT TYPE CODE (PTC)

P A T M

(21A) QUANTITY

1

(22A) FEE DUE FOR (PTC) IN BLOCK 20A

\$ 45.00

FCC USE ONLY

(23A) FCC CODE 1

(24A) FCC CODE 2

(19B) FCC CALL SIGN/OTHER ID

KRL533

(20B) PAYMENT TYPE CODE (PTC)

P A T M

(21B) QUANTITY

1

(22B) FEE DUE FOR (PTC) IN BLOCK 20B

\$ 45.00

FCC USE ONLY

(23B) FCC CODE 1

(24B) FCC CODE 2

(19C) FCC CALL SIGN/OTHER ID

KST587

(20C) PAYMENT TYPE CODE (PTC)

P A T M

(21C) QUANTITY

1

(22C) FEE DUE FOR (PTC) IN BLOCK 20C

\$ 45.00

FCC USE ONLY

(23C) FCC CODE 1

(24C) FCC CODE 2

(19D) FCC CALL SIGN/OTHER ID

KNEJ216

(20D) PAYMENT TYPE CODE (PTC)

P A T M

(21D) QUANTITY

1

(22D) FEE DUE FOR (PTC) IN BLOCK 20D

\$ 45.00

FCC USE ONLY

(23D) FCC CODE 1

(24D) FCC CODE 2

**SECTION D - TAXPAYER INFORMATION (REQUIRED)**

(25)

PAYER TIN

0 5 2 0 8 2 0 0 7 1

(26) COMPLETE THIS BLOCK ONLY IF APPLICANT NAME IN B-11 IS DIFFERENT FROM PAYER NAME IN A-2

APPLICANT TIN

0 1 3 4 9 2 4 7 1 0

**SECTION E - CERTIFICATION**

(27) CERTIFICATION STATEMENT

I, Westley Kay Hedgepeth

(PRINT NAME)

, Certify under penalty of perjury that the foregoing and supporting information  
are true and correct to the best of my knowledge, information and belief. SIGNATURE Westley Kay Hedgepeth

**SECTION F - CREDIT CARD PAYMENT INFORMATION**

(28)

MASTERCARD/VISA ACCOUNT NUMBER:

EXPIRATION DATE:

MASTERCARD

1 2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0

1 2 3 4

MONTH YEAR

VISA

I hereby authorize the FCC to charge my VISA or MASTERCARD  
for the service(s)/authorization(s) herein described.

AUTHORIZED SIGNATURE

DATE

**REMITTANCE ADVICE (Continuation Sheet)**PAGE NO. 2 OF 2**USE THIS SECTION ONLY FOR EACH ADDITIONAL APPLICANT****SECTION BB - ADDITIONAL APPLICANT INFORMATION**

(11) APPLICANT NAME (if paying by credit card, enter name exactly as it appears on your card)

AT&amp;T Corp.

(12) STREET ADDRESS LINE NO. 1

32 Avenue of the Americas

(13) STREET ADDRESS LINE NO. 2

(14) CITY

New York

(15) STATE

NY

(16) ZIP CODE

10013

(17) DAYTIME TELEPHONE NUMBER (include area code)

(18) COUNTRY CODE (if not in U.S.A.)

**IF MORE BOXES ARE NEEDED, USE ADDITIONAL FCC 159-C CONTINUATION SHEETS TO LIST EACH SERVICE****SECTION CC - PAYMENT INFORMATION**

(19A) FCC CALL SIGN/OTHER ID

WNLJ857

(20A) PAYMENT TYPE CODE (PTC)

P A T M

(21A) QUANTITY

1

\$

(22A) FEE DUE FOR (PTC) IN BLOCK 20A

45.00

FCC USE ONLY

(23A) FCC CODE 1

(24A) FCC CODE 2

(19B) FCC CALL SIGN/OTHER ID

KVZ416

(20B) PAYMENT TYPE CODE (PTC)

P A T M

(21B) QUANTITY

1

\$

(22B) FEE DUE FOR (PTC) IN BLOCK 20B

45.00

FCC USE ONLY

(23B) FCC CODE 1

(24B) FCC CODE 2

(19C) FCC CALL SIGN/OTHER ID

(20C) PAYMENT TYPE CODE (PTC)

(21C) QUANTITY

(22C) FEE DUE FOR (PTC) IN BLOCK 20C

FCC USE ONLY

(23C) FCC CODE 1

(24C) FCC CODE 2

(19D) FCC CALL SIGN/OTHER ID

(20D) PAYMENT TYPE CODE (PTC)

(21D) QUANTITY

(22D) FEE DUE FOR (PTC) IN BLOCK 20D

FCC USE ONLY

(23D) FCC CODE 1

(24D) FCC CODE 2

**SECTION DD - TAXPAYER INFORMATION**

(25) COMPLETE THIS BLOCK ONLY IF SECTION BB IS APPLICABLE

**APPLICANT TIN****0**

1

3

4

9

2

4

7

1

0

VENDOR

CHECK NO. 58693

OUR REF. NO.	YOUR INV. NO.	INVOICE DATE	INVOICE AMOUNT	AMOUNT PAID	DISCOUNT TAKEN
21473	0604992	06/04/99	FILING FEE/1203.22 270.00	270.00 Check total	.00 270.00

**COLE, RAYWID & BRAVERMAN, L.L.P.**  
1919 PENNSYLVANIA AVENUE N.W.  
WASHINGTON, DC 20006-3458

NATIONS BANK, N.A.  
15-120-540

58693

CHECK NO. 058693 CHECK DATE 06/04/99 VENDOR NO. FCC

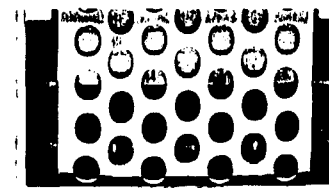
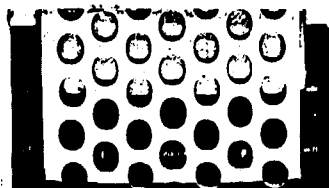
PAY  
TWO HUNDRED SEVENTY AND 00/100 DOLLARS\*\*\*\*\*

CHECK AMOUNT  
\$\*\*\*\*\*270.00

TO THE  
ORDER  
OF  
FEDERAL COMMUNICATIONS  
COMMISSION



⑈058693⑈ ⑆054001204⑆ 002086050069⑈



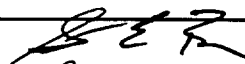
Security features included. Details on back.

UNITED STATES OF AMERICA  
FEDERAL COMMUNICATIONS COMMISSION

FOR  
FCC  
USE  
ONLY

**PART I - APPLICATION FOR CONSENT TO TRANSFER CONTROL OF CORPORATION HOLDING STATION LICENSE**

(This application must be filed before Transfer of Control takes place)

1. (a) Name of corporate licensee <b>MediaOne of New England, Inc.</b>			
(b) Number and street address <b>Attn: Christine Page 188 Inverness Drive West, 6th Floor</b>			
(c) City <b>Englewood</b>	(d) State <b>CO</b>	(e) ZIP Code <b>80112</b>	
2. Internet address:		3. Taxpayer Identification Number <b>02-0275191</b>	
4. Call sign and radio service of each station <b>KNDH452 (IB) KNEJ216 (IB)</b> <b>KRL533 (IB) WNLJ857 (IB)</b> <b>KST587 (IB) KVZ416 (IB)</b>			
5. (a) Fee Type Code <b>PATM</b>	(b) Fee Multiple <b>0006</b>	(c) Fee Due \$ <b>270.00</b>	FOR FCC USE ONLY
6. Name(s) and Address(es) of Transferee <b>AT&amp;T Corp. 32 Avenue of the Americas 1120 20th St., NW</b> <b>New York, NY 10013 Washington, DC 20036</b>			
7. Subsequent to the Transfer of Control, will the licensee corporation be the same corporate entity? That is, will it retain its present name, corporate charter, State of incorporation, etc.? If "NO", give details on Page 3.			YES NO <input checked="" type="checkbox"/> <input type="checkbox"/>
8. Subsequent to the Transfer of Control, will the licensee corporation be a representative of any foreign government? If "YES", give details on Page 3.			<input type="checkbox"/> <input checked="" type="checkbox"/>
9. THIS SECTION TO BE ANSWERED ONLY BY LICENSEES OF PUBLIC COAST, AIRPORT CONTROL TOWER, AERONAUTICAL ENROUTE, AERONAUTICAL FIXED, OR COMMON CARRIER ALASKA PUBLIC FIXED STATIONS. SUBSEQUENT TO THE TRANSFER OF CONTROL:			
(a) Will any officer or director of such corporation be an alien? If "YES", see Instruction 6.			YES NO <input type="checkbox"/> <input type="checkbox"/>
(b) Will more than 1/5 of the capital stock be either owned of record or may it be voted by aliens or their representatives, or by a foreign government or representative thereof, or by any corporation organized under the laws of a foreign country? If "YES", see Instruction 6.			<input type="checkbox"/> <input type="checkbox"/>
(c) Will the licensee be directly or indirectly controlled by any other corporation? If "YES", answer Items (d) through (h) below.			<input type="checkbox"/> <input type="checkbox"/>
(d) What is the name and address of the corporation in immediate control?			
(e) Under the laws of what State or Country is the controlling corporation organized?			
(f) Is more than 1/4 of the capital stock of controlling corporation either owned of record or may it be voted by aliens or their representatives, or by a foreign government or representative thereof, or by any corporation organized under the laws of a foreign country? If "YES", give details on Page 3.			YES NO <input type="checkbox"/> <input type="checkbox"/>
(g) Is any officer or more than 1/4 of the directors of the controlling corporation an alien? If "YES", on Page 3 state name, nationality, and position of each, and state the total number of directors, and give a brief biographical statement for each alien.			<input type="checkbox"/> <input type="checkbox"/>
(h) Is the controlling corporation in turn controlled by other companies? If "YES", on Page 3, or a separate sheet of paper, provide information for each of these controlling companies covering information requested in Items (d) through (h).			<input type="checkbox"/> <input type="checkbox"/>
<b>CERTIFICATION</b> ● Applicant waives any claim to the use of any particular frequency regardless of prior use by license or otherwise; ● Applicant will have unlimited access to the radio equipment and will control access to exclude unauthorized persons; ● Neither applicant nor any member thereof is a foreign government or representative thereof; ● Applicant certifies that all statements made in this application and attachments are true, complete and made in good faith; ● Neither the applicant nor any other party to the application is subject to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance.			
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(A)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).			
SIGNATURE <input checked="" type="checkbox"/> 		DATE <b>6/28/99</b>	
Authorized Employee of Licensee Corporation			
SIGNATURE 		DATE <b>7/1/99</b>	
Transferee of Control (Check one)			
<input type="checkbox"/> Individual	<input type="checkbox"/> Partner	<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other (Specify):



**DETAILS / ADDITIONAL INFORMATION:**

UNITED STATES OF AMERICA  
FEDERAL COMMUNICATIONS COMMISSION

**PART II - AUTHORIZATION TO HOLD STATION LICENSE(S) AFTER TRANSFER OF CONTROL OF CORPORATION**

**1. Name and mailing address of corporate licensee**

MediaOne of New England, Inc.  
Attn: Christine Page  
188 Inverness Drive West, 6th Floor  
Englewood, CO 80112

**2. Call sign and radio service of each station**

KNDH452 (IB)  
KRL533 (IB)  
KST587 (IB)  
KNEJ216 (IB)  
WNLJ857 (IB)  
KVZ416 (IB)

**DO NOT WRITE IN THIS BLOCK**

**CONDITIONS OF GRANT**

The corporate licensee is hereby authorized to continue holding the radio station license(s) listed in item 2 on the basis of the representations made in the application for this authorization.

This authorization is granted for the term of the outstanding license(s) for the station(s) listed in item 2.

**DATE AUTHORIZED:**

**FEDERAL  
COMMUNICATIONS  
COMMISSION**

**THIS AUTHORIZATION TO BE FILED WITH  
CORPORATION'S RADIO STATION RECORDS**

COLE, RAYWID & BRAVERMAN, L.L.P.

ATTORNEYS AT LAW

SECOND FLOOR

1919 PENNSYLVANIA AVENUE, N.W.

WASHINGTON, D.C. 20006-3458

(202) 659-9750

July 7, 1999

ALAN RAYWID  
(1930-1991)

OF COUNSEL  
FRANCES J. CHETWIND  
ELLEN M. DEUTCH

FACSIMILE  
(202) 458-0062 JUL 12 1999

INTERNET  
WWW.CRB.LAW.COM  
FEDERAL COMMUNICATIONS COMMISSION  
OFFICE OF THE SECRETARY

JOHN P. COLE, JR.  
BURT A. BRAVERMAN  
ROBERT L. JAMES  
JOHN D. SEIVER  
WESLEY R. HEPPLER  
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THERESA A. ZETERBERG  
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JOHN C. DODGE  
FREDERICK W. GIROUX  
GEOFFREY C. COOK  
MARIA T. BROWNE  
DONNA C. RATTLE  
THOMAS SCOTT THOMPSON  
ADAM S. CALDWELL  
SANDRA GREINER GIBBS  
JAMES W. TOMLINSON  
MARK S. KRISTIANSEN  
CHRISTIN S. MCMELEY\*  
HEATHER M. WILSON  
DAVID N. TOBENKIN\*

\*ADMITTED IN OKLAHOMA ONLY  
\*ADMITTED IN CALIFORNIA ONLY

FCC/MELLON

JUL 07 1999

**BY HAND DELIVERY**

Federal Communications Commission  
Transfer of Control  
P. O. Box 358130  
Pittsburgh, PA 15251-5130

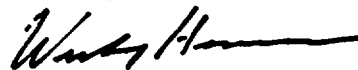
Re: **Transfer to AT&T Corp. of MediaOne's Interest in FCC Licenses  
Business Radio Service**

Ladies and Gentlemen:

Enclosed please find FCC Form 703 requesting authority for the transfer from MediaOne to AT&T Corp. of MediaOne's interest in MediaOne of New York, Inc., the licensee of the referenced facilities on the attached list. We are also enclosing FCC Form 159 and a check in the amount of \$90.00 to cover the required filing fee.

Should you have any questions regarding this matter, please contact the undersigned.

Sincerely,



Wesley R. Heppler

Enclosure

EXHIBIT

ENTITY NAME	CALL SIGN	LOCATION	STATE
MediaOne of New York, Inc.	KNHU458	Haverstraw	NY
MediaOne of New York, Inc.	WNHK653	Haverstraw	NY

READ INSTRUCTIONS CAREFULLY  
BEFORE PROCEEDING

FEDERAL COMMUNICATIONS COMMISSION

APPROVED BY OMB 3060-0589

REMITTANCE ADVICE

PAGE NO. 1 OF 1

SPECIAL USE

FCC USE ONLY

(1) LOCKBOX #

SECTION A - PAYER INFORMATION

(2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card)

Cole, Raywid & Braverman, L.L.P.

(3) TOTAL AMOUNT PAID (dollars and cents)

\$ 90.00

(4) STREET ADDRESS LINE NO. 1

1919 Pennsylvania Avenue, N.W.

(5) STREET ADDRESS LINE NO. 2

Suite 200

(6) CITY

Washington

(7) STATE

DC

(8) ZIP CODE

20006

(9) DAYTIME TELEPHONE NUMBER (include area code)

202-659-9750

(10) COUNTRY CODE (if not in U.S.A.)

IF PAYER NAME AND THE APPLICANT NAME ARE DIFFERENT, COMPLETE SECTION B  
IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C)

SECTION B - APPLICANT INFORMATION

(11) APPLICANT NAME (if paying by credit card, enter name exactly as it appears on your card)

AT&T Corp.

(12) STREET ADDRESS LINE NO. 1

32 Avenue of the Americas

(13) STREET ADDRESS LINE NO. 2

(14) CITY

New York

(15) STATE

NY

(16) ZIP CODE

10013

(17) DAYTIME TELEPHONE NUMBER (include area code)

(18) COUNTRY CODE (if not in U.S.A.)

COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEETS (FORM 159-C)

SECTION C - PAYMENT INFORMATION

(19A) FCC CALL SIGN/OTHER ID

KNHU458

(20A) PAYMENT TYPE CODE (PTC)

P A T M

(21A) QUANTITY

1

(22A) FEE DUE FOR (PTC) IN BLOCK 20A

\$ 45.00

FCC USE ONLY

(23A) FCC CODE 1

(24A) FCC CODE 2

(19B) FCC CALL SIGN/OTHER ID

WNBH653

(20B) PAYMENT TYPE CODE (PTC)

P A T M

(21B) QUANTITY

1

(22B) FEE DUE FOR (PTC) IN BLOCK 20B

\$ 45.00

FCC USE ONLY

(23B) FCC CODE 1

(24B) FCC CODE 2

(19C) FCC CALL SIGN/OTHER ID

(20C) PAYMENT TYPE CODE (PTC)

(21C) QUANTITY

(22C) FEE DUE FOR (PTC) IN BLOCK 20C

FCC USE ONLY

(23C) FCC CODE 1

(24C) FCC CODE 2

(19D) FCC CALL SIGN/OTHER ID

(20D) PAYMENT TYPE CODE (PTC)

(21D) QUANTITY

(22D) FEE DUE FOR (PTC) IN BLOCK 20D

FCC USE ONLY

(23D) FCC CODE 1

(24D) FCC CODE 2

SECTION D - TAXPAYER INFORMATION (REQUIRED)

(25)

PAYER TIN

0 5 2 0 8 2 0 0 7 1

(26) COMPLETE THIS BLOCK ONLY IF APPLICANT NAME IN B-11 IS DIFFERENT FROM PAYER NAME IN A-2

APPLICANT TIN

0 1 3 4 9 2 4 7 1 0

SECTION E - CERTIFICATION

(27) CERTIFICATION STATEMENT

I, Westley Kay Hedgepeth

(PRINT NAME)

, Certify under penalty of perjury that the foregoing and supporting information  
are true and correct to the best of my knowledge, information and belief.

SIGNATURE

*Westley Kay Hedgepeth*

SECTION F - CREDIT CARD PAYMENT INFORMATION

(28)

MASTERCARD/VISA ACCOUNT NUMBER:

EXPIRATION DATE:

MASTERCARD

VISA

I hereby authorize the FCC to charge my VISA or MASTERCARD  
for the service(s)/authorization(s) herein described.

AUTHORIZED SIGNATURE

DATE

COLE, RAYWID & BRAVERMAN, L.L.P.  
VENDOR

CHECK NO. 58697

OUR REF. NO.	YOUR INV. NO.	INVOICE DATE	INVOICE AMOUNT	AMOUNT PAID	DISCOUNT TAKEN
21477	0604996	06/04/99	FILING FEE/1203.22 90.00	90.00 Check total	.00 90.00

COLE, RAYWID & BRAVERMAN, L.L.P.  
1919 PENNSYLVANIA AVENUE N.W.  
WASHINGTON, DC 20006-3458

NATIONSBANK, N.A.  
15-120-540

58697

CHECK NO. CHECK DATE VENDOR NO.  
058697 06/04/99 FCC

PAY  
NINETY AND 00/100 DOLLARS\*\*\*\*\*

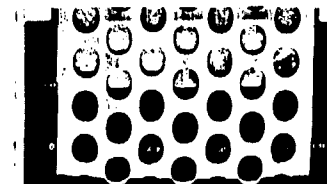
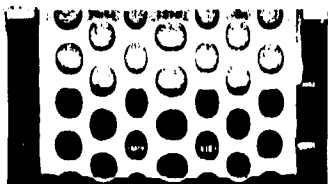
CHECK AMOUNT  
\$\*\*\*\*\*90.00

TO THE  
ORDER  
OF

FEDERAL COMMUNICATIONS  
COMMISSION

*Qil A*

⑈058697⑈ ⑆054001204⑆ 002086050069⑈

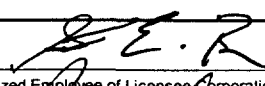
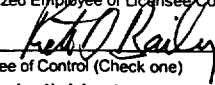


Security features included. Details on back.

UNITED STATES OF AMERICA  
FEDERAL COMMUNICATIONS COMMISSION

FOR  
FCC  
USE  
ONLY

**PART I - APPLICATION FOR CONSENT TO TRANSFER CONTROL OF CORPORATION HOLDING STATION LICENSE**  
(This application must be filed before Transfer of Control takes place)

1. (a) Name of corporate licensee <b>MediaOne of New York, Inc.</b>			
(b) Number and street address <b>Attn: Christine Page 188 Inverness Drive West, 6th Floor</b>			
(c) City <b>Englewood</b>	(d) State <b>CO</b>	(e) ZIP Code <b>80112</b>	
2. Internet address:		3. Taxpayer Identification Number <b>04-2789590</b>	
4. Call sign and radio service of each station <b>KNHU458 (IB) WNBH653 (IB)</b>			
5. (a) Fee Type Code <b>PATM</b>	(b) Fee Multiple <b>0002</b>	(c) Fee Due \$ <b>90.00</b>	FOR FCC USE ONLY
6. Name(s) and Address(es) of Transferee <b>AT&amp;T Corp. 32 Avenue of the Americas 1120 20th St., NW New York, NY 10013 Washington, DC 20036</b>			
7. Subsequent to the Transfer of Control, will the licensee corporation be the same corporate entity? That is, will it retain its present name, corporate charter, State of incorporation, etc.? If "NO", give details on Page 3.			YES NO <b>X</b>
8. Subsequent to the Transfer of Control, will the licensee corporation be a representative of any foreign government? If "YES", give details on Page 3.			<b>X</b>
<b>9. THIS SECTION TO BE ANSWERED ONLY BY LICENSEES OF PUBLIC COAST, AIRPORT CONTROL TOWER, AERONAUTICAL ENROUTE, AERONAUTICAL FIXED, OR COMMON CARRIER ALASKA PUBLIC FIXED STATIONS. SUBSEQUENT TO THE TRANSFER OF CONTROL:</b>			
(a) Will any officer or director of such corporation be an alien? If "YES", see Instruction 6.			YES NO
(b) Will more than 1/5 of the capital stock be either owned of record or may it be voted by aliens or their representatives, or by a foreign government or representative thereof, or by any corporation organized under the laws of a foreign country? If "YES", see Instruction 6.			
(c) Will the licensee be directly or indirectly controlled by any other corporation? If "YES", answer Items (d) through (h) below.			
(d) What is the name and address of the corporation in immediate control?			
(e) Under the laws of what State or Country is the controlling corporation organized?			
(f) Is more than 1/4 of the capital stock of controlling corporation either owned of record or may it be voted by aliens or their representatives, or by a foreign government or representative thereof, or by any corporation organized under the laws of a foreign country? If "YES", give details on Page 3.			YES NO
(g) Is any officer or more than 1/4 of the directors of the controlling corporation an alien? If "YES", on Page 3 state name, nationality, and position of each, and state the total number of directors, and give a brief biographical statement for each alien.			
(h) Is the controlling corporation in turn controlled by other companies? If "YES", on Page 3, or a separate sheet of paper, provide information for each of these controlling companies covering information requested in Items (d) through (h).			
<b>CERTIFICATION</b> ● Applicant waives any claim to the use of any particular frequency regardless of prior use by license or otherwise; ● Applicant will have unlimited access to the radio equipment and will control access to exclude unauthorized persons; ● Neither applicant nor any member thereof is a foreign government or representative thereof; ● Applicant certifies that all statements made in this application and attachments are true, complete and made in good faith; ● Neither the applicant nor any other party to the application is subject to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance.			
<b>WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(A)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).</b>			
SIGNATURE <b>X</b>  Authorized Employee of Licensee Corporation		DATE <b>X</b> <b>6/28/99</b>	
SIGNATURE  Transferee of Control (Check one)		DATE <b>7/1/99</b>	
<input type="checkbox"/> Individual <input type="checkbox"/> Partner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (Specify):			

**DETAILS / ADDITIONAL INFORMATION:**

UNITED STATES OF AMERICA  
FEDERAL COMMUNICATIONS COMMISSION

**PART II - AUTHORIZATION TO HOLD STATION LICENSE(S) AFTER TRANSFER OF CONTROL OF CORPORATION**

1. Name and mailing address of corporate licensee

MediaOne of New York, Inc.  
Attn: Christine Page  
188 Inverness Drive West, 6th Floor  
Englewood, CO 80112

2. Call sign and radio service of each station

KNHU458 (IB)  
WNHK653 (IB)

**DO NOT WRITE IN THIS BLOCK**

**CONDITIONS OF GRANT**

The corporate licensee is hereby authorized to continue holding the radio station license(s) listed in item 2 on the basis of the representations made in the application for this authorization.

This authorization is granted for the term of the outstanding license(s) for the station(s) listed in item 2.

**DATE AUTHORIZED:**

**FEDERAL  
COMMUNICATIONS  
COMMISSION**

**THIS AUTHORIZATION TO BE FILED WITH  
CORPORATION'S RADIO STATION RECORDS**

DOCKET FILE COPY ORIGINAL

STAMP AND RETURN

COLE, RAYWID & BRAVERMAN, L.L.P.

ATTORNEYS AT LAW

SECOND FLOOR

1919 PENNSYLVANIA AVENUE, N.W.

WASHINGTON, D.C. 20006-3458

(202) 659-9750

July 7, 1999

ALAN RAYWID  
(1930-1991)

OF COUNSEL  
FRANCIS J. RAYWID  
ELLEN S. RAYWID  
**RECEIVED**

FACSIMILE  
(202) 452-0069  
JUL 12 1999

INTERNET  
FEDERAL COMMUNICATIONS COMMISSION  
OFFICE OF THE SECRETARY

JOHN P. COLE, JR.  
BURT A. BRAVERMAN  
ROBERT L. JAMES  
JOHN D. SEIVER  
WESLEY R. HEPPLER  
PAUL GLIST  
DAVID M. SILVERMAN  
JAMES F. IRELAND, III  
STEVEN J. HORVITZ  
CHRISTOPHER W. SAVAGE  
ANN FLOWERS  
ROBERT G. SCOTT, JR.  
SUSAN WHELAN WESTFALL  
THERESA A. ZETERBERG  
KARLYN D. STANLEY  
JOHN DAVIDSON THOMAS  
JOHN C. DODGE  
FREDERICK W. GIROUX  
GEOFFREY C. COOK  
MARIA T. BROWNE  
DONNA C. RATLEY  
THOMAS SCOTT THOMPSON  
ADAM S. CALDWELL  
SANDRA GREINER GIBBS  
JAMES W. TOMLINSON  
MARK S. KRISTIANSEN  
CHRISTIN S. MCMELEY\*  
HEATHER M. WILSON  
DAVID N. TOBENKIN\*

\*ADMITTED IN OKLAHOMA ONLY  
\*ADMITTED IN CALIFORNIA ONLY

FCC/MELLON

JUL 07 1999

**BY HAND DELIVERY**

Federal Communications Commission  
Transfer of Control  
P. O. Box 358130  
Pittsburgh, PA 15251-5130

Re: **Transfer to AT&T Corp. of MediaOne's Interest in FCC License  
KNEM221 -- Chicago, IL  
Business Radio Service**

Ladies and Gentlemen:

Enclosed please find FCC Form 703 requesting authority for the transfer from MediaOne to AT&T Corp. of MediaOne's interest in MediaOne of Northern Illinois, Inc., the licensee of the above-referenced facility. We are also enclosing FCC Form 159 and a check in the amount of \$45.00 to cover the required filing fee.

Should you have any questions regarding this matter, please contact the undersigned.

Sincerely,



Wesley R. Heppler

Enclosure



READ INSTRUCTIONS CAREFULLY  
BEFORE PROCEEDING

FEDERAL COMMUNICATIONS COMMISSION

APPROVED BY OMB 3060-0589

REMITTANCE ADVICE

PAGE NO. 1 OF 1

SPECIAL USE

FCC USE ONLY

(1) LOCKBOX #

SECTION A - PAYER INFORMATION

(2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card)

Cole, Raywid & Braverman, L.L.P.

(3) TOTAL AMOUNT PAID (dollars and cents)

\$ 45.00

(4) STREET ADDRESS LINE NO. 1

1919 Pennsylvania Avenue, N.W.

(5) STREET ADDRESS LINE NO. 2

Suite 200

(6) CITY

Washington

(7) STATE

DC

(8) ZIP CODE

20006

(9) DAYTIME TELEPHONE NUMBER (Include area code)

202-659-9750

(10) COUNTRY CODE (if not in U.S.A.)

IF PAYER NAME AND THE APPLICANT NAME ARE DIFFERENT, COMPLETE SECTION B  
IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C)

SECTION B - APPLICANT INFORMATION

(11) APPLICANT NAME (if paying by credit card, enter name exactly as it appears on your card)

AT&T Corp.

(12) STREET ADDRESS LINE NO. 1

32 Avenue of the Americas

(13) STREET ADDRESS LINE NO. 2

(14) CITY

New York

(15) STATE

NY

(16) ZIP CODE

10013

(17) DAYTIME TELEPHONE NUMBER (Include area code)

(18) COUNTRY CODE (if not in U.S.A.)

COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEETS (FORM 159-C)

SECTION C - PAYMENT INFORMATION

(19A) FCC CALL SIGN/OTHER ID

KNEM221

(20A) PAYMENT TYPE CODE (PTC)

P A T M

(21A) QUANTITY

1

(22A) FEE DUE FOR (PTC) IN BLOCK 20A

\$ 45.00

FCC USE ONLY

(23A) FCC CODE 1

(24A) FCC CODE 2

(19B) FCC CALL SIGN/OTHER ID

(20B) PAYMENT TYPE CODE (PTC)

(21B) QUANTITY

(22B) FEE DUE FOR (PTC) IN BLOCK 20B

FCC USE ONLY

(23B) FCC CODE 1

(24B) FCC CODE 2

(19C) FCC CALL SIGN/OTHER ID

(20C) PAYMENT TYPE CODE (PTC)

(21C) QUANTITY

(22C) FEE DUE FOR (PTC) IN BLOCK 20C

FCC USE ONLY

(23C) FCC CODE 1

(24C) FCC CODE 2

(19D) FCC CALL SIGN/OTHER ID

(20D) PAYMENT TYPE CODE (PTC)

(21D) QUANTITY

(22D) FEE DUE FOR (PTC) IN BLOCK 20D

FCC USE ONLY

(23D) FCC CODE 1

(24D) FCC CODE 2

SECTION D - TAXPAYER INFORMATION (REQUIRED)

(25)

PAYER TIN

0 5 2 0 8 2 0 0 7 1

(26) COMPLETE THIS BLOCK ONLY IF APPLICANT NAME IN B-11 IS DIFFERENT FROM PAYER NAME IN A-2

APPLICANT TIN

0 1 3 4 9 2 4 7 1 0

SECTION E - CERTIFICATION

(27) CERTIFICATION STATEMENT

I, Westley Kay Hedgepeth

(PRINT NAME)

, Certify under penalty of perjury that the foregoing and supporting information  
are true and correct to the best of my knowledge, information and belief. SIGNATURE *Westley Kay Hedgepeth*

SECTION F - CREDIT CARD PAYMENT INFORMATION

(28)

MASTERCARD/VISA ACCOUNT NUMBER:

EXPIRATION DATE:

MASTERCARD

VISA

I hereby authorize the FCC to charge my VISA or MASTERCARD  
for the service(s)/authorization(s) herein described.

AUTHORIZED SIGNATURE

DATE

COLE, RAYWID & BRAVERMAN, L.L.P.  
VENDOR

CHECK NO. 58703  
058703

OUR REF. NO.	YOUR INV. NO.	INVOICE DATE	INVOICE AMOUNT	AMOUNT PAID	DISCOUNT TAKEN
21483	06049912	06/04/99	FILING FEE/1203.22 45.00	45.00 Check total	.00 45.00

COLE, RAYWID & BRAVERMAN, L.L.P.  
1919 PENNSYLVANIA AVENUE N.W.  
WASHINGTON, DC 20006-3458

NATIONSBANK, N.A.  
15-120-540

58703

CHECK NO. 058703 CHECK DATE 06/04/99 VENDOR NO. FCC

PAY  
FORTY-FIVE AND 00/100 DOLLARS\*\*\*\*\*

CHECK AMOUNT  
\$\*\*\*\*\*45.00

TO THE ORDER OF  
FEDERAL COMMUNICATIONS  
COMMISSION

*Oil K*

⑈058703⑈ ⑆054001204⑆ 002086050069⑈

00000795

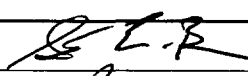
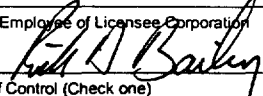
Security features included. Details on back.

UNITED STATES OF AMERICA  
FEDERAL COMMUNICATIONS COMMISSION

FOR  
FCC  
USE  
ONLY

**PART I - APPLICATION FOR CONSENT TO TRANSFER CONTROL OF CORPORATION HOLDING STATION LICENSE**

(This application must be filed before Transfer of Control takes place)

1.(a) Name of corporate licensee <b>MediaOne of Northern Illinois, Inc.</b>			
(b) Number and street address <b>Attn: Christine Page 188 Inverness Drive West, 6th Floor</b>			
(c) City <b>Englewood</b>	(d) State <b>CO</b>	(e) ZIP Code <b>80112</b>	
2. Internet address:		3. Taxpayer Identification Number <b>06-1008626</b>	
4. Call sign and radio service of each station <b>KNEM221 (YB)</b>			
5.(a) Fee Type Code <b>PATM</b>	(b) Fee Multiple <b>0001</b>	(c) Fee Due \$ <b>45.00</b>	FOR FCC USE ONLY
6. Name(s) and Address(es) of Transferee <b>AT&amp;T Corp. 32 Avenue of the Americas 1120 20th St., NW New York, NY 10013 Washington, DC 20036</b>			
7. Subsequent to the Transfer of Control, will the licensee corporation be the same corporate entity? That is, will it retain its present name, corporate charter, State of incorporation, etc.? If "NO", give details on Page 3.			YES NO <b>X</b>
8. Subsequent to the Transfer of Control, will the licensee corporation be a representative of any foreign government? If "YES", give details on Page 3.			<b>X</b>
<b>9. THIS SECTION TO BE ANSWERED ONLY BY LICENSEES OF PUBLIC COAST, AIRPORT CONTROL TOWER, AERONAUTICAL ENROUTE, AERONAUTICAL FIXED, OR COMMON CARRIER ALASKA PUBLIC FIXED STATIONS. SUBSEQUENT TO THE TRANSFER OF CONTROL:</b>			
(a) Will any officer or director of such corporation be an alien? If "YES", see Instruction 6.			YES NO
(b) Will more than 1/5 of the capital stock be either owned of record or may it be voted by aliens or their representatives, or by a foreign government or representative thereof, or by any corporation organized under the laws of a foreign country? If "YES", see Instruction 6.			
(c) Will the licensee be directly or indirectly controlled by any other corporation? If "YES", answer Items (d) through (h) below.			
(d) What is the name and address of the corporation in immediate control?			
(e) Under the laws of what State or Country is the controlling corporation organized?			
(f) Is more than 1/4 of the capital stock of controlling corporation either owned of record or may it be voted by aliens or their representatives, or by a foreign government or representative thereof, or by any corporation organized under the laws of a foreign country? If "YES", give details on Page 3.			YES NO
(g) Is any officer or more than 1/4 of the directors of the controlling corporation an alien? If "YES", on Page 3 state name, nationality, and position of each, and state the total number of directors, and give a brief biographical statement for each alien.			
(h) Is the controlling corporation in turn controlled by other companies? If "YES", on Page 3, or a separate sheet of paper, provide information for each of these controlling companies covering information requested in Items (d) through (h).			
<b>CERTIFICATION</b>			
<ul style="list-style-type: none"><li>● Applicant waives any claim to the use of any particular frequency regardless of prior use by license or otherwise;</li><li>● Applicant will have unlimited access to the radio equipment and will control access to exclude unauthorized persons;</li><li>● Neither applicant nor any member thereof is a foreign government or representative thereof;</li><li>● Applicant certifies that all statements made in this application and attachments are true, complete and made in good faith;</li><li>● Neither the applicant nor any other party to the application is subject to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance.</li></ul>			
<b>WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(A)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).</b>			
SIGNATURE <b>X</b> 		DATE <b>X</b> <b>6/28/99</b>	
Authorized Employee of Licensee Corporation			
SIGNATURE 		DATE <b>7/1/99</b>	
Transferee of Control (Check one)			
<input type="checkbox"/> Individual	<input type="checkbox"/> Partner	<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other (Specify):

**DETAILS / ADDITIONAL INFORMATION:**

UNITED STATES OF AMERICA  
FEDERAL COMMUNICATIONS COMMISSION

**PART II - AUTHORIZATION TO HOLD STATION LICENSE(S) AFTER TRANSFER OF CONTROL OF CORPORATION**

1. Name and mailing address of corporate licensee

MediaOne of Northern Illinois, Inc.  
Attn: Christine Page  
188 Inverness Drive West, 6th Floor  
Englewood, CO 80112

2. Call sign and radio service of each station

KNEM221 (YB)

**DO NOT WRITE IN THIS BLOCK**

**CONDITIONS OF GRANT**

The corporate licensee is hereby authorized to continue holding the radio station license(s) listed in item 2 on the basis of the representations made in the application for this authorization.

This authorization is granted for the term of the outstanding license(s) for the station(s) listed in item 2.

**DATE AUTHORIZED:**

**FEDERAL  
COMMUNICATIONS  
COMMISSION**

**THIS AUTHORIZATION TO BE FILED WITH  
CORPORATION'S RADIO STATION RECORDS**

COLE, RAYWID & BRAVERMAN, L.L.P.

JOHN P. COLE, JR.  
BURT A. BRAVERMAN  
ROBERT L. JAMES  
JOHN D. SEIVER  
WESLEY R. HEPPLER  
PAUL GLIST  
DAVID M. SILVERMAN  
JAMES F. IRELAND, III  
STEVEN J. HORVITZ  
CHRISTOPHER W. SAVAGE  
ANN FLOWERS  
ROBERT G. SCOTT, JR.  
SUSAN WHELAN WESTFALL  
THERESA A. ZETERBERG  
KARLYN D. STANLEY  
JOHN DAVIDSON THOMAS  
JOHN C. DODGE  
FREDERICK W. GIROUX  
GEOFFREY C. COOK  
MARIA T. BROWNE  
DONNA C. RATTLEY  
THOMAS SCOTT THOMPSON  
ADAM S. CALDWELL  
SANDRA GREINER GIBBS  
JAMES W. TOMLINSON  
MARK S. KRISTIANSEN  
CHRISTIN S. MCMELEY\*  
HEATHER M. WILSON  
DAVID N. TOBENKIN\*

\*ADMITTED IN OKLAHOMA ONLY  
\*ADMITTED IN CALIFORNIA ONLY

ATTORNEYS AT LAW  
SECOND FLOOR  
1919 PENNSYLVANIA AVENUE, N.W.  
WASHINGTON, D.C. 20006-3458  
(202) 659-9750

July 7, 1999

ALAN RAYWID  
(1930-1991)  
**RECEIVED**  
FRANCES J. CHETWYND  
ELLEN S. DEUTSCH  
JUL 12 1999  
FACSIMILE  
(202) 452-0067  
FEDERAL COMMUNICATIONS COMMISSION  
INTERNET  
www.fcc.gov

FCC/MELLON JUL 07 1999

**BY HAND DELIVERY**

Federal Communications Commission  
Transfer of Control  
P. O. Box 358130  
Pittsburgh, PA 15251-5130

**Re: Transfer to AT&T Corp. of MediaOne's Interest in FCC Licenses  
Business Radio Service**

Ladies and Gentlemen:

Enclosed please find FCC Form 703 requesting authority for the transfer from MediaOne to AT&T Corp. of MediaOne's interest in MediaOne of Ohio, Inc., the licensee of the referenced facilities on the attached list. We are also enclosing FCC Form 159 and a check in the amount of \$675.00 to cover the required filing fee.

Should you have any questions regarding this matter, please contact the undersigned.

Sincerely,



Wesley R. Heppler

Enclosure

## EXHIBIT

ENTITY NAME	CALL SIGN	LOCATION	STATE
MediaOne of Ohio, Inc.	WQK346	South Amherst	OH
MediaOne of Ohio, Inc.	WQW327	N. Ridgeville	OH
MediaOne of Ohio, Inc.	WSU819	East Lake	OH
MediaOne of Ohio, Inc.	WCL262	Xenia	OH
MediaOne of Ohio, Inc.	KNHW355	Springfield	OH
MediaOne of Ohio, Inc.	KWK997	Circleville	OH
MediaOne of Ohio, Inc.	KYC473	Circleville	OH
MediaOne of Ohio, Inc.	WNFH308	Norwalk	OH
MediaOne of Ohio, Inc.	WNQW368	Dayton	OH
MediaOne of Ohio, Inc.	WNZV590	Athens	OH
MediaOne of Ohio, Inc.	WPIA224	Dayton	OH
MediaOne of Ohio, Inc.	WPIU450	Galion	OH
MediaOne of Ohio, Inc.	WPKW523	Findlay	OH
MediaOne of Ohio, Inc.	KLA274	Kettering	OH
MediaOne of Ohio, Inc.	WPMM558	Kettering	OH

READ INSTRUCTIONS CAREFULLY  
BEFORE PROCEEDING

FEDERAL COMMUNICATIONS COMMISSION  
**REMITTANCE ADVICE**

APPROVED BY OMB 3060-0589

SPECIAL USE

FCC USE ONLY

PAGE NO. 1 OF 4

(1) LOCKBOX #

**SECTION A - PAYER INFORMATION**

(2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card)

Cole, Raywid & Braverman, L.L.P.

(3) TOTAL AMOUNT PAID (dollars and cents)

\$ 675.00

(4) STREET ADDRESS LINE NO. 1

1919 Pennsylvania Avenue, N.W.

(5) STREET ADDRESS LINE NO. 2

Suite 200

(6) CITY

Washington

(7) STATE

DC

(8) ZIP CODE

20006

(9) DAYTIME TELEPHONE NUMBER (Include area code)

202-659-9750

(10) COUNTRY CODE (if not in U.S.A.)

IF PAYER NAME AND THE APPLICANT NAME ARE DIFFERENT, COMPLETE SECTION B  
IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C)

**SECTION B - APPLICANT INFORMATION**

(11) APPLICANT NAME (if paying by credit card, enter name exactly as it appears on your card)

AT&T Corp.

(12) STREET ADDRESS LINE NO. 1

32 Avenue of the Americas

(13) STREET ADDRESS LINE NO. 2

(14) CITY

New York

(15) STATE

NY

(16) ZIP CODE

10013

(17) DAYTIME TELEPHONE NUMBER (Include area code)

(18) COUNTRY CODE (if not in U.S.A.)

COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEETS (FORM 159-C)

**SECTION C - PAYMENT INFORMATION**

(19A) FCC CALL SIGN/OTHER ID

WQK346

(20A) PAYMENT TYPE CODE (PTC)

P A T M

(21A) QUANTITY

1

(22A) FEE DUE FOR (PTC) IN BLOCK 20A

\$ 45.00

FCC USE ONLY

(23A) FCC CODE 1

(24A) FCC CODE 2

(19B) FCC CALL SIGN/OTHER ID

WQW327

(20B) PAYMENT TYPE CODE (PTC)

P A T M

(21B) QUANTITY

1

(22B) FEE DUE FOR (PTC) IN BLOCK 20B

\$ 45.00

FCC USE ONLY

(23B) FCC CODE 1

(24B) FCC CODE 2

(19C) FCC CALL SIGN/OTHER ID

WSU819

(20C) PAYMENT TYPE CODE (PTC)

P A T M

(21C) QUANTITY

1

(22C) FEE DUE FOR (PTC) IN BLOCK 20C

\$ 45.00

FCC USE ONLY

(23C) FCC CODE 1

(24C) FCC CODE 2

(19D) FCC CALL SIGN/OTHER ID

WCL262

(20D) PAYMENT TYPE CODE (PTC)

P A T M

(21D) QUANTITY

1

(22D) FEE DUE FOR (PTC) IN BLOCK 20D

\$ 45.00

FCC USE ONLY

(23D) FCC CODE 1

(24D) FCC CODE 2

**SECTION D - TAXPAYER INFORMATION (REQUIRED)**

(25)

PAYER TIN

0 5 2 0 8 2 0 0 7 1

(26) COMPLETE THIS BLOCK ONLY IF APPLICANT NAME IN B-11 IS DIFFERENT FROM PAYER NAME IN A-2)

APPLICANT TIN

0 1 3 4 9 2 4 7 1 0

**SECTION E - CERTIFICATION**

(27) CERTIFICATION STATEMENT

I, Westley Kay Hedgepeth

(PRINT NAME)

are true and correct to the best of my knowledge, information and belief. SIGNATURE *Westley Kay Hedgepeth*

**SECTION F - CREDIT CARD PAYMENT INFORMATION**

(28)

MASTERCARD/VISA ACCOUNT NUMBER:

EXPIRATION DATE:

MASTERCARD

VISA

I hereby authorize the FCC to charge my VISA or MASTERCARD  
for the service(s)/authorization(s) herein described.

AUTHORIZED SIGNATURE

DATE

**REMITTANCE ADVICE (Continuation Sheet)**PAGE NO. 2 OF 4**USE THIS SECTION ONLY FOR EACH ADDITIONAL APPLICANT****SECTION BB - ADDITIONAL APPLICANT INFORMATION**

(11) APPLICANT NAME (if paying by credit card, enter name exactly as it appears on your card)

AT&amp;T Corp.

(12) STREET ADDRESS LINE NO. 1

32 Avenue of the Americas

(13) STREET ADDRESS LINE NO. 2

(14) CITY

New York

(15) STATE

NY

(16) ZIP CODE

10013

(17) DAYTIME TELEPHONE NUMBER (include area code)

(18) COUNTRY CODE (if not in U.S.A.)

**IF MORE BOXES ARE NEEDED, USE ADDITIONAL FCC 159-C CONTINUATION SHEETS TO LIST EACH SERVICE****SECTION CC - PAYMENT INFORMATION**

(19A) FCC CALL SIGN/OTHER ID	(20A) PAYMENT TYPE CODE (PTC)	(21A) QUANTITY	(22A) FEE DUE FOR (PTC) IN BLOCK 20A	FCC USE ONLY
KNHW355	P A T M	1	\$ 45.00	
(23A) FCC CODE 1	(24A) FCC CODE 2			
(19B) FCC CALL SIGN/OTHER ID	(20B) PAYMENT TYPE CODE (PTC)	(21B) QUANTITY	(22B) FEE DUE FOR (PTC) IN BLOCK 20B	FCC USE ONLY
KWK997	P A T M	1	\$ 45.00	
(23B) FCC CODE 1	(24B) FCC CODE 2			
(19C) FCC CALL SIGN/OTHER ID	(20C) PAYMENT TYPE CODE (PTC)	(21C) QUANTITY	(22C) FEE DUE FOR (PTC) IN BLOCK 20C	FCC USE ONLY
KYC473	P A T M	1	\$ 45.00	
(23C) FCC CODE 1	(24C) FCC CODE 2			
(19D) FCC CALL SIGN/OTHER ID	(20D) PAYMENT TYPE CODE (PTC)	(21D) QUANTITY	(22D) FEE DUE FOR (PTC) IN BLOCK 20D	FCC USE ONLY
WNFH308	P A T M	1	\$ 45.00	
(23D) FCC CODE 1	(24D) FCC CODE 2			

**SECTION DD - TAXPAYER INFORMATION**

(25) COMPLETE THIS BLOCK ONLY IF SECTION BB IS APPLICABLE

**APPLICANT TIN**

0	1	3	4	9	2	4	7	1	0
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**REMITTANCE ADVICE (Continuation Sheet)**PAGE NO. 3 OF 4**USE THIS SECTION ONLY FOR EACH ADDITIONAL APPLICANT****SECTION BB - ADDITIONAL APPLICANT INFORMATION**

(11) APPLICANT NAME (if paying by credit card, enter name exactly as it appears on your card)

AT&amp;T Corp.

(12) STREET ADDRESS LINE NO. 1

32 Avenue of the Americas

(13) STREET ADDRESS LINE NO. 2

(14) CITY

New York

(15) STATE

NY

(16) ZIP CODE

10013

(17) DAYTIME TELEPHONE NUMBER (include area code)

(18) COUNTRY CODE (if not in U.S.A.)

**IF MORE BOXES ARE NEEDED, USE ADDITIONAL FCC 159-C CONTINUATION SHEETS TO LIST EACH SERVICE****SECTION CC - PAYMENT INFORMATION**

(19A) FCC CALL SIGN/OTHER ID

WNQW368

(20A) PAYMENT TYPE CODE (PTC)

P A T M

(21A) QUANTITY

1

s

(22A) FEE DUE FOR (PTC) IN BLOCK 20A

45.00

FCC USE ONLY

(23A) FCC CODE 1

(24A) FCC CODE 2

(19B) FCC CALL SIGN/OTHER ID

WNZV590

(20B) PAYMENT TYPE CODE (PTC)

P A T M

(21B) QUANTITY

1

s

(22B) FEE DUE FOR (PTC) IN BLOCK 20B

45.00

FCC USE ONLY

(23B) FCC CODE 1

(24B) FCC CODE 2

(19C) FCC CALL SIGN/OTHER ID

WPJA224

(20C) PAYMENT TYPE CODE (PTC)

P A T M

(21C) QUANTITY

1

s

(22C) FEE DUE FOR (PTC) IN BLOCK 20C

45.00

FCC USE ONLY

(23C) FCC CODE 1

(24C) FCC CODE 2

(19D) FCC CALL SIGN/OTHER ID

WPIU450

(20D) PAYMENT TYPE CODE (PTC)

P A T M

(21D) QUANTITY

1

s

(22D) FEE DUE FOR (PTC) IN BLOCK 20D

45.00

FCC USE ONLY

(23D) FCC CODE 1

(24D) FCC CODE 2

**SECTION DD - TAXPAYER INFORMATION**

(25) COMPLETE THIS BLOCK ONLY IF SECTION BB IS APPLICABLE

**APPLICANT TIN**

0

1

3

4

9

2

4

7

1

0